

Case 1:07-cv-06335
U.S. Department of Justice
United States Marshals Service

Document 13

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PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

MTHN

PLAINTIFF Corey Manuel		COURT CASE NUMBER 07C6335
DEFENDANT Sergeant Lyles, et al.		TYPE OF PROCESS S/C
SERVE ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Captain McGuire	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 2600 South California Chicago IL, Division 1 Number #14	
AT	SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: Cory Manuel, #2007-0014551 Cook County Jail P.O. Box 089002 Chicago, IL 60608	
		<div>Number of process to be served with this Form - 285</div> <div>Number of parties to be served in this case</div> <div>Check for service on U.S.A.</div>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

c/o Khonna, Legal Dept. 2nd Flr. Div. 5

Signature of Attorney or other Originator requesting service on behalf of:

Corey Manuel

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

11-21-07

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 3 of 5	District of Origin No. 24	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk TD	Date 11-21-07
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Officer Ronna Farnandis

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service
12/10/07 Time
2:35 am

Signature of U.S. Marshal or Deputy
[Signature]

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
one	service fee	charged	same	location	case	

REMARKS: *See process sheet #1 for charges.*